

**Application form - TOGETHER International**

**1. We are/I am**: (check the box corresponding to your situation)

|  |
| --- |
| … : A multi-stakeholder platform … : A local (municipality), regional, national or international public authority … : A collective actor (association, NGO, etc.) … : A person/an individual |

**2.** **The territory that we represent**:

|  |
| --- |
| ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. |

**3. Reference persons/contact persons:**

|  |
| --- |
| Last name: ………………………………. First name: ………………………..Address: ………………………………………………………………………………...City: ……………………………………… Post code: ……………….. Country: …………………E-mail: ……………………………………………@...................Tel n°: ……………………………………………………. |

**4. Our interest in both the SPIRAL methodology and TOGETHER Network and our expectations:**

|  |
| --- |
| …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. |

 **5. Commitments we are willing to make:**

|  |
| --- |
| ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. |

**6. Remarks and suggestions:**

|  |
| --- |
| ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………. |